

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 101593427	FILING DATE 09-19-06					
							APPLICANT(S)						
3-1-07 10-23-08 CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51	1		1			
2	1		1		1		52		①	1			
3		1		1		1	53		1		1		
4		1		1		1	54				1		
5		1		1		1	55				1		
6		1		1		1	56				2		
7		1		1		1	57				2		
8		1		1		1	58						
9		1		1		1	59						
10		1		1		1	60						
11		1		1		1	61						
12		1	1		1		62						
13		1	1		1		63						
14		1		1		1	64						
15		1		1		1	65						
16		1	1		1		66						
17		1	1		1		67						
18	1			1	1		68						
19		2	1		1		69						
20		2		1		1	70						
21		2		1		1	71						
22		2		1		1	72						
23		1		1		1	73						
24		1		1		1	74						
25		1		1		1	75						
26		1	1		1		76						
27		2	1		1		77						
28		1	1		1		78						
29	1		1		1		79						
30	1		1		1		80						
31	1		1		1		81						
32		2		2		1	82						
33		2		2		1	83						
34		①		11	1		84						
35		1		11		1	85						
36		①		11	1		86						
37		①		11			87						
38		1		11			88						
39		①		11			89						
40		①		11			90						
41		①		11			91						
42	1		1		1		92						
43	1		1		1		93						
44	1		1		1		94						
45	1		1		1		95						
46		2		2		1	96						
47		①		11			97						
48	1		1		1		98						
49	1		1		1		99						
50	1		1		1		100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	14	↓	20	↓	10	↓
TOTAL DEP.		←		←		←	TOTAL DEP.	47	←	147	←	22	←
TOTAL CLAIMS							TOTAL CLAIMS	61		167		32	

9 x 11
 2 x 5
 2 x 9
 20 x 1